

**BUSINESS LICENSE FOR RENTAL HOUSING FEES**

Fees are based upon cumulative number of units at all locations.

1 – 4 units: \$50; 5 – 24 units: \$100; 25+ units: \$200

All licenses expire June 30. Renewal notices are mailed in May. Business licenses are not pro-rated and are non-transferable. If you discontinue your rental activity in Auburn, please notify the Permit Center at (253) 931-3090.

License # _____

PLEASE RETURN TO:Permit Center
25 West Main Street
Auburn, WA 98001
Phone: (253) 931-3090
Fax: (253) 804-3114**APPLICATION FOR BUSINESS LICENSE FOR RENTAL HOUSING (ORDINANCE NO. 5882)****LICENSEE MAILING ADDRESS****(All information related to this license will be sent to this address)**

Name: _____

Title: _____

Address: _____

Suite: _____

City, State: _____

Zip: _____

Phone: _____

Fax: _____

e-mail: _____

WEB SITE (if applicable): _____

LEGAL STATUS: ☐ Sole Proprietor ☐ Individual ☐ Corporation ☐ LLC ☐ Partnership
☐ Other _____**COMPLETE THIS SECTION FOR ALL OWNERS, AGENTS, PARTNERS OR CORPORATE OFFICERS NOT LISTED ABOVE (attach separate page if necessary):**

1) Name:		Title:	% Owned
Home Address:		City/State/Zip:	Home Phone:
Date of Birth:	Place of Birth:	Driver's License #:	

2) Name:		Title:	% Owned
Home Address:		City/State/Zip:	Home Phone:
Date of Birth:	Place of Birth:	Driver's License #:	

MANAGER/AGENT/EMERGENCY CONTACT:		Title:	Business Phone:
Home Address:		City/State/Zip:	Home Phone:
Date of Birth:	Place of Birth:	Drivers License #:	

FOR OFFICE USE ONLY:

Prior License # _____ Date Received: _____ TR # _____ \$ _____

Issue Date: _____ SIC Code _____

WA STATE UBI/TAX #: If applicable	BUSINESS INFORMATION FOR CORPORATIONS, LLCs, PARTNERSHIPS FEDERAL TAX ID #:	CONTRACTOR ID #: If applicable
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RENTAL HOUSING UNITS (list all properties you own)		
Property Name/Address	# of Units	Parcel Number

Have you ever had a rental housing business license with the City of Auburn denied, revoked or suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when and for what property: _____
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APPLICANT'S SIGNATURE
<p>I hereby certify and declare under penalty of perjury under Washington law that the statements furnished by me on this application are true and complete to the best of my knowledge. I understand that the issuance of this license is conditioned upon compliance at all times with all applicable ordinances, regulations and statutes of the City of Auburn and the State of Washington. The issuance of this business license does not imply compliance with the Zoning Code and International Fire and Building Codes.</p> <p style="margin-top: 20px;"> Date _____ Signature _____ Title _____ </p>

THIS APPLICATION ALSO SERVES AS YOUR APPLICATION
 FOR A CITY OF AUBURN BUSINESS LICENSE.
 IF APPROVED, ONLY A SINGLE LICENSE WILL BE ISSUED.